

## 2700 INTERNAL TRANSFER REQUEST FOR S.N.

17/069,482

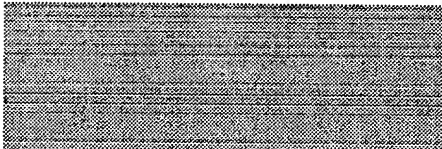
|  |   |
|--|---|
| DATE: <u>9/8/03</u>  | FROM: <u>Lee Nguyen (2682)</u> (print name)   |
| <b>FORWARD TO:</b><br>A. Art Unit: <u>2660</u><br>B. Class: <u>370</u><br>C Subclass: <u>336</u> | <b>REASON(S):</b><br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): <u>All</u> |

## FURTHER EXPLANATION IF NEEDED:

Mux/Demux TDMA

|  |  |
|--|--|
| DATE: _____  | FROM: _____ (print name)   |
| <b>FORWARD TO:</b><br>A. Art Unit: _____<br>B. Class: _____<br>C Subclass: _____ | <b>REASON(S):</b><br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): _____ |

## FURTHER EXPLANATION IF NEEDED:

|   |  |
|---|--|
| DATE: _____   | FROM: _____ (print name)   |
| <b>FORWARD TO CLASSIFIER</b><br> | <b>REASON(S):</b><br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): _____ |

## FURTHER EXPLANATION IF NEEDED:

## DISPOSITION BY 2700 CLASSIFICATION

|  |  |
|--|--|
| DATE: _____  | CLASSIFIER: _____  |
| <b>FORWARD TO:</b><br>A. Art Unit: _____<br>B. Class: _____<br>C Subclass: _____ | <b>REASON(S):</b><br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): _____ |

## FURTHER EXPLANATION IF NEEDED: